PTO/SB/22 (10-00)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

| In re Application of Michael John Shea  Application Number 10/658,679   Filed 09/09/2003   For Method, Apparatus & Progrem Storage Device for Verliying Expanse of a Redundarii Fue Channel Pich Group Art Unit 2616   Examiner Method In C. Marcelo This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and appropriate non-small-entity fee are as follows (check time period desired):  One month (37 CFR 1.17(a)(1))   \$_40.00   Two months (37 CFR 1.17(a)(2))   \$_460.00   Three months (37 CFR 1.17(a)(3))   \$_40.00   Four months (37 CFR 1.17(a)(4))   \$_50.00   Four months (37 CFR 1.17(a)(4))   \$_50.00   Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$_50.00   A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached. The Commissioner has already been authorized to charge fees in this application to a Deposit Account. The Commissioner has already been authorized to charge sees which may be required, or credit any overpayment, to Deposit Account. Number 500-246. I have enclosed a duplicate copy of this sheet.  I am the   applicant/inventor   assignees of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). Registration on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  WARNING: Information on this form may become public. Credit card information and authorization on PTO-2038.  James C. Evans. Typed or printed name  NOTE: Signatures of all the inventors or assignees of record of the entire interest or th | PETITION FOR EXTENSION OF   | Docket Number (Optional)<br>3917       |              |                          |  |  |  |  |  |  |
|--|---|--|--------------|--------------------------|--|--|--|--|--|--|
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and appropriate non-small-entity fee are as follows (check time period desired):    One month (37 CFR 1.17(a)(1))  | In re Application of Michael John Shea                                |  |              |                          |  |  |  |  |  |  |
| Method, Apparatus A program Starage Device for Verthyring Estatement of the Channel Path  Group Art Unit 2616  |   | Application Number 10/658,679          | _            | Filed 09/09/2003         |  |  |  |  |  |  |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filling a reply in the above identified application.  The requested extension and appropriate non-small-entity fee are as follows (check time period desired):  One month (37 CFR 1.17(a)(1))  Two months (37 CFR 1.17(a)(2))  Three months (37 CFR 1.17(a)(3))  Four months (37 CFR 1.17(a)(4))  Five months (37 CFR 1.17(a)(5))  Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$  A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Commissioner has already been authorized to charge fees in this application to a Deposit Account.  The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _500-246  I am the applicant/inventor  assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  attorney or agent under 37 CFR 1.34(a).  Registration number if acting under 37 CFR 1.34(a) _56,730  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  ### WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  ### WARNING: Information on this form may become public. Oredit card information and authorization on PTO-2038.  ### WARNING: Information on this form may become public. Oredit card information and authorization on PTO-2038.  ### WARNING: Information on this form provide credit card information and authorization on PTO-2038.  ### WARNING: Information on this form provide credit card information and authorization on PTO-2038.  ### WARNING: Information on file of the entire interest or their representative(s) are requir                  |   | For                                    |              |                          |  |  |  |  |  |  |
| reply in the above identified application.  The requested extension and appropriate non-small-entity fee are as follows (check time period desired):  One month (37 CFR 1.17(a)(1))  Two months (37 CFR 1.17(a)(2))  Three months (37 CFR 1.17(a)(3))  Four months (37 CFR 1.17(a)(4))  Five months (37 CFR 1.17(a)(5))  Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$   |   | Group Art Unit 2616                    | Examine      | Melvin C. Marcelo        |  |  |  |  |  |  |
| (check time period desired):    One month (37 CFR 1.17(a)(1))  |   |  |              |                          |  |  |  |  |  |  |
|  | •   | e non-small-entity fee are as follows  |              |                          |  |  |  |  |  |  |
| Three months (37 CFR 1.17(a)(3))  Four months (37 CFR 1.17(a)(4))  Five months (37 CFR 1.17(a)(5))  Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$  | One month (37 CFR 1.17(a)   | (1))                                   |              | \$                       |  |  |  |  |  |  |
| Four months (37 CFR 1.17(a)(4))  Five months (37 CFR 1.17(a)(5))  Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$  A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Commissioner has already been authorized to charge fees in this application to a Deposit Account.  The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _500-246  I have enclosed a duplicate copy of this sheet.  I am the applicant/inventor  assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  attorney or agent under 37 CFR 1.34(a).  Registration number if acting under 37 CFR 1.34(a).  Registration on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  WARNING: Information on this form may become public. Credit card information and authorization on PTO-2038.  James C. Evans  Typed or printed name  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.  | ✓ Two months (37 CFR 1.17(a)  | n)(2))                                 |              | \$_460.00                |  |  |  |  |  |  |
| Five months (37 CFR 1.17(a)(5))  Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$   | Three months (37 CFR 1.17   | (a)(3))                                |              | \$                       |  |  |  |  |  |  |
| Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$  | Four months (37 CFR 1.17(a  | a)(4))                                 |              | · <b>\$</b> _            |  |  |  |  |  |  |
| above is reduced by one-half, and the resulting fee is: \$ A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached. The Commissioner has already been authorized to charge fees in this application to a Deposit Account. The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 500-246 I have enclosed a duplicate copy of this sheet. I am the applicant/inventor assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). Signature  James C. Evans Typed or printed name  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.   | Five months (37 CFR 1.17(a  |  | \$           |                          |  |  |  |  |  |  |
| The Commissioner has already been authorized to charge fees in this application to a Deposit Account.  The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number500-246   | above is reduced by one-half, and the resulting fee is: \$            |  |              |                          |  |  |  |  |  |  |
| application to a Deposit Account.  The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number _500-246  I have enclosed a duplicate copy of this sheet.  I am the applicant/inventor  assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record.  attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _56,730  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  ### June 1.2   |   |  |              |                          |  |  |  |  |  |  |
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| or credit any overpayment, to Deposit Account Number   |   | orized to charge any fees which may be | required.    |                          |  |  |  |  |  |  |
| am the   | or credit any overpayment, to Deposit Account Number <u>500-246</u> . |  |              |                          |  |  |  |  |  |  |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  attorney or agent of record.  attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). Registration on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  **Signature**  James C. Evans  Typed or printed name  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.   |   |  |              |                          |  |  |  |  |  |  |
| Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  attorney or agent of record.  attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). Registration on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  **Signature**  James C. Evans  Typed or printed name  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.   |   | e entire interest. See 37 CFR 3 71     |              |                          |  |  |  |  |  |  |
| attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) 56,730  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  ### J2 2008 Date  James C. Evans  Typed or printed name  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.  | Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).         |  |              |                          |  |  |  |  |  |  |
| Registration number if acting under 37 CFR 1.34(a) 56,730  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.    Signature     James C. Evans     Typed or printed name  |   |  |              |                          |  |  |  |  |  |  |
| be included on this form. Provide credit card information and authorization on PTO-2038.    Signature   Signature     James C. Evans     Total of  | Registration number if acting under 37 CFR 1.34(a).                   |  |              |                          |  |  |  |  |  |  |
| James C. Evans  Typed or printed name  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.  Total offorms are submitted.   |   |  |              |                          |  |  |  |  |  |  |
| James C. Evans  Typed or printed name  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.  Total offorms are submitted.   | al   . ~  | 0                                      | 4            |                          |  |  |  |  |  |  |
| James C. Evans  Typed or printed name  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.  Total offorms are submitted.   | 8/12/2008   | James .                                | ture         | ans                      |  |  |  |  |  |  |
| Typed or printed name  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.  Total offorms are submitted.   | Date  | //                                     | luie         |                          |  |  |  |  |  |  |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.  Total offorms are submitted.  |   |  | or printe    | d name                   |  |  |  |  |  |  |
| forms if more than one signature is required, see below.  Total offorms are submitted.   |   |  | ·            |                          |  |  |  |  |  |  |
|  |   |  | ve(s) are re | equired. Submit multiple |  |  |  |  |  |  |
|  |   |  |              |                          |  |  |  |  |  |  |

the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

08/18/2008 CCHAU1 00000001 10658679

PTO/SB/17 (10-07)

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| Effective on   |                           |                     | T                             |                     |             |                   | if Known        |                      |  |
|--|---------------------------|---------------------|-------------------------------|---------------------|-------------|-------------------|-----------------|----------------------|--|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).   |                           | 8). <u> </u>        | Application Number 10/658,679 |                     |             |                   |                 |                      |  |
| FEE TRANSMITTAL  |                           | _ <u>  ^\</u>       | Filing Date                   |                     | 09/09/2003  |                   |                 |                      |  |
|  | Y 2008                    |                     |                               | rst Named Inve      | -           |                   | John Shea       |                      |  |
| F01 F  | 1 2000                    |                     | _                             | <del></del>         |             | Melvin C. Marcelo |                 |                      |  |
| Applicant claims small entity  | status. See               | 37 CFR 1.27         | <u> </u>                      | <del></del>         |             |                   | 2616            |                      |  |
| TOTAL AMOUNT OF PAYMENT  | (\$)                      | 460.00              | <u> </u>                      |                     | <del></del> | 3917              |                 |                      |  |
| TOTAL AMOUNT OF PAYMENT (\$) 460.00 Attorney Docket No.   3917   |                           |                     |                               |                     |             |                   |                 |                      |  |
| METHOD OF PAYMENT (check all that apply)   |                           |                     |                               |                     |             |                   |                 |                      |  |
| Check Credit Card  |                           | •                   |                               |                     |             |                   | 0 T             |                      |  |
| Deposit Account Deposit  | Account Num               | ber: <u>500246</u>  |                               | Deposit Acc         | ount Na     | me: BECH          | (& Tysver,      | P.L.L.C              |  |
| For the above-identified do  | eposit accou              | nt, the Director is | hereby                        | authorized to:      | (check      | all that ap       | ply)            |                      |  |
| Charge fee(s) indica   | ated below                |                     |                               | Charge              | fee(s)      | indicated         | below, except   | t for the filing fee |  |
| Charge any addition  | nal fee(s) or             | underpayments o     | of fee(s)                     | Credit a            | any ove     | erpayment         | s               |                      |  |
| under 37 CFR 1.16 WARNING: Information on this form  | may become                | public. Credit care | d inform                      | ation should not    | t be inc    | luded on th       | is form. Provid | le credit card       |  |
| information and authorization on PT  | O-2038.                   |                     |                               |                     |             |                   |                 |                      |  |
| FEE CALCULATION  |                           |                     |                               |                     |             |                   |                 |                      |  |
| 1. BASIC FILING, SEARCH,   |                           |                     |                               | rëro.               |             | ALNIATION         |                 |                      |  |
| FI   | LING FEES<br><u>Small</u> |                     |                               | FEES<br>mall Entity | EXAIN       | INATION<br>Small  | N FEES Entity   |                      |  |
|  | e (\$) <u>Fee</u>         |                     | e (\$)                        | Fee (\$)            | <u>Fee</u>  |                   | <u>(\$)</u>     | Fees Paid (\$)       |  |
| Utility 31   | 0 15:                     | 5 51                | 10                            | 255                 | 210         | ) 10              | )5              |                      |  |
| Design 21  | 0 . 10:                   | 5 10                | 00                            | 50                  | 130         | ) 6               |                 |                      |  |
| Plant 21   | 0 10:                     | 5 31                | 0                             | 155                 | 160         | ) 8               |                 |                      |  |
| Reissue 31   | 0 15:                     | 5 51                | 0                             | 255                 | 620         | 31                | 0 .             | ·                    |  |
| Provisional 21   | 0 10:                     | 5 ,                 | 0                             | 0                   | C           | )                 | 0 .             |                      |  |
| 2. EXCESS CLAIM FEES   |                           |                     |                               |                     |             |                   |                 | all Entity           |  |
| Fee Description Each claim over 20 (included)  | ling Reissu               | ies)                |                               |                     |             | 1                 | 50              | Fee (\$)<br>25       |  |
| Each independent claim ov  |                           |                     |                               |                     |             |                   | 210             | 105                  |  |
| Multiple dependent claims  | ,                         |                     |                               |                     |             |                   | 370             | 185                  |  |
|  | a Claims                  | Fee (\$)            | Fee Pa                        | <u>id (\$)</u>      |             | _                 | ultiple Deper   |                      |  |
| - 20 or HP =  HP = highest number of total claims  | X<br>naid for if gr       |                     |                               |                     |             |                   | Fee (\$)        | Fee Paid (\$)        |  |
|  | <u>a Claims</u>           |                     | Fee Pai                       | d (\$)              |             | · –               | <del></del>     |                      |  |
| - 3 or HP =  | X                         |                     |                               | <del></del>         |             |                   |                 |                      |  |
| HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  |                           |                     |                               |                     |             |                   |                 |                      |  |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer  |                           |                     |                               |                     |             |                   |                 |                      |  |
| listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50  |                           |                     |                               |                     |             |                   |                 |                      |  |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) |                           |                     |                               |                     |             |                   |                 |                      |  |
| 100 = / 50 = (round <b>up</b> to a whole number) x =   |                           |                     |                               |                     |             |                   |                 |                      |  |
| 4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)   |                           |                     |                               |                     |             |                   |                 |                      |  |
| Other (e.g., late filing sure  | -                         | ,                   | •                             | *                   |             |                   |                 | \$460                |  |
| ·  |                           |                     |                               |                     |             |                   |                 |                      |  |
| SUBMITTED BY   | <del>11 57</del>          | <del></del>         | Rea                           | istration No.       |             |                   | Telephone 6     | 10.015.0000          |  |
| Signature  | ·· cer                    | mens                |                               | mey/Agent) 56       | 5,730       |                   |                 |                      |  |
| Name (Print/Type) James C. Evans   | 3                         |                     |                               |                     |             |                   | Date 8/1        | 2/2008               |  |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.